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027765 7390 10/05/2004

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Celia Hsieh	(Depositor's name)
<i>Celia Hsieh</i>	(Signature)
2004/12/31	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/707,837	01/16/2004	Tsung-Huei Ren	ALIP0036USA	1836

TITLE OF INVENTION: METHOD OF DETERMINING A MERGING BIT IN AN OPTICAL STORAGE DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370 1400	\$300	\$1670 1700	01/05/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
JEAN PIERRE, PEGUY	2819	341-058000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Winston Hsu

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

MEDIATEK INCORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

 5F, No. 1-2, Innovation Road 1, Science-Based Industrial Park,  
 Hsin-Chu Hsien 300, Taiwan, R.O.C.
Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3105 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*Winston Hsu*

Date

12/31/2004

Typed or printed name

**Winston Hsu**

Registration No.

**41,526**

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**FAX TO: Mail Stop Issue Fee**

**Fax: (703) 746-4000**

**FROM: Winston Hsu, PATENT AGENT, REG. NO.: 41,526**

**SERIAL NO.: 10/707,837**

**ATTORNEY DOCKET NO.: ALIP0036USA**

**SUBJECT: ISSUE FEE PAYMENT**

**TOTAL PAGES: 3 PAGES (INCLUDING COVER PAGE)**

**Winston Hsu 2004/12/31**

**ALIP0036USA0\_E2**



PTO/SB/21 (09-04)  
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/707,837	
	Filing Date	01/16/2004	
	First Named Inventor	Tsung-Huei Ren	
	Art Unit	2819	
	Examiner Name	JEAN PIERRE, PEGUY	
Total Number of Pages In This Submission	2	Attorney Docket Number	ALIP0036USA

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	North America Intellectual Property Corporation		
Signature	<i>Winston Hsu</i>		
Printed name	Winston Hsu		
Date		Reg. No.	41,526

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